POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION O.I.P.E. CLASSIFIER FORMALITY REVIEW RESPONSE FORMALITY REVIEW	1/2/ C.Y.C.	10591 JC 530	8-16-00

INDEX OF CLAIMS

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28	77 78	12		
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30	80	12		+-+
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46	95	145		
47	96	146		++-
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If more than 150 claims or 10 actions staple additional sheet here

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